Revised Manifest Summary Report

TEAM MFG	
TEAM MFG	

Manifest Date	Bates#	Manifest#	Quantity	Units	Gallons	Code	# Trips	Assessed (gl) Volume	
05/29/1990		89511450		1668	LBS		CMP		

Total Records: 1

Default Volume: 0

Total Waste Volume: .834

UNIFORM H		1. Generator	S US EPA ID No).	Manifest Document No.	2. Pag	is not r	beriupe	ne shaded areas by Federal law.		
3 Generator's Name of Team Mig	and Mailing Address	b)				A. State	Manifest Docum	1 1	4 5 0		
1600 Maha Compton C		0251				B. State	Generator's ID	Li			
5. Transporter 1 Com	pany Name		6. GAD09	US EPA 10 Num	nber		Transporter's III porter's Phone) !!!	341		
	to Kleen Co GADQ9 \$631719						E. State Transporter's ID F. Transporter's Phone				
9 Designated Escility Omega Rec	Name and Site Addr	ress	10.	US EPA ID Nur	nber	G. State	Facility's ID		- 1		
Omega Kec 12504 Whi Whittier	ttier	V		20/5003		H. Facili	A D 0 4 2 ty's Phone	1214	5001		
		Ohii No		2245001	12 Co	ntainers	13. Total Quantity	14. Unit	I. Waste N		
11, US DOT Descripti					No	Туре	N H	Wt/Vo	State		
WASTE LIQ	UID 1-1-1	TRICHL	OROETHA	NE UN283	002	DM	1 1/1010	G	211 EPA/Other		
b, .							100		State222		
WASTE OIL	& WATER				00	2 DM	I IFET	G	EPA/Other		
c.									State		
							1111		EPA/Other		
d.		=+					i		State		
									EPA/Other		
J. Additional Descript	iona for Materials Lis	sted Above				K. Han	dling Codes for	b.	O		
						c.	01	d.	01		
							1				
15. Special Handling	Instructions and Addi	itional Informatio	n				7	li .			
							1				
							1				
and are classified national government if i am a large que to be economical present and future organizations.	CERTIFICATION: it is do, packed, marked, a nent regulations. uantity generator, I cally practicable and the threat to human he select the best waste.	and labeled, and entity that I have hat I have select ealth and the en	are in all respe a program in pla ed the practical vironment: OR.	ace to reduce the ble method of tres if I am a small que	volume and toxi itment, storage, intity generator,	city of wast or disposal I have made	e generated to t	he degra	ee I have determ which minimizes inimize my wast		
Printed/Typed Name To N / / 17. Transporter 1 Ac	a Garc	, a		Signature	AL	ferice	4		Month Day		
		eceipt of Materi	ıla	Signature			1		Month Da		
Printed/Typed Name Richard I	Lipton	and at Materia		K	thurst I	ipla	11		1 15121		
Printed/Typed Name	knowledgement of R	eceipt or water		Signature		•	1		Month Day		
							*)				
19. Discrepancy Indi	cation Space						1.4				
20. Facility Owner o	r Operator Certificati	on of receipt of	hazardous mate	rials covered by	this manifest ex	cept as note	ed in Item 19.		e Month Da		

21

To: P.O. Box 3000, Sacramento, CA 95812